



Seattle
Office of Immigrant and
Refugee Affairs

New Citizen Campaign Letter of Intent 2019 Questions and Answers

This document reflects questions received by December 7, 2018 at 5pm.

Programmatic Questions

1. Do we have to commit to 12 clinics? Would we have to hit 25-50 participants each month?

The 12 monthly clinics are to be hosted among all the agencies, so one agency would not be responsible for leading all 12 workshops during the year. Each agency will be able to lead or co-lead one, two, three or more clinics during the year.

2. How many hours of work would co-leading a clinic entail?

For most agencies, the work outlined above represents at least 150 hours to 200 hours or more of work. While co-lead agencies split the load of the responsibilities, working with a partner agency requires lots of time coordinating and communicating. Agencies that have led multiple clinics in the past may be able to complete clinic planning and implementation in less time but learning how to plan a clinic for the first time will likely represent more hours.

Some agencies may choose to split this load internally over a small team, while others have one staff member or intern to coordinate all aspects of the clinic, calling in other staff or volunteers for help when needed.

3. Do we need to have an already established partnership to propose co-leading a clinic? Do we need to list a specific agency as our co-lead?

Agencies will not be penalized for not listing a specific co-lead. Also, it is alright to list ideas or preferences for a potential co-lead agency, even if you have not created a plan with this organization. No matter whether an agency is listed, you should mention your agency strengths and what complementary strengths you would seek in a co-lead.

4. If we co-lead a clinic with an agency, does it have to be with a new partner? Or is it okay to partner with someone we have already worked with?

We have no requirements for proposed partnerships except for an explanation of how the proposed partner's strengths compliment your agency strengths. If both agency's strengths are similar, it would be good to review the Evaluation Criteria, and make sure that other aspects of your proposal reflect these criteria. Capacity building remains an underlying theme of the NCC program but is not outlined specifically in the Guidelines or Narrative questions. The review

panel will have the option to propose new partnerships, and we will finalize partnerships as part of the contract negotiations.

5. Do we have to co-lead with a Seattle-based partner?

No. You must find a venue to host your clinic in Seattle, but neither you or your partner agency needs to be located in Seattle. You could host your clinic at a Seattle Parks and Recreation Community Center with the Office of Immigrant and Refugee Affairs' (OIRA) help in booking. Or you could host at a place of worship or any other publicly accessible space. You could also choose to partner with a Seattle-based nonprofit to host a clinic at their agency offices or to get their assistance in finding a Seattle venue.

6. According to page 4 of the application form, "Clinic venue options include Northgate, Bitter Lake, Lake City, Delridge, and Yesler Community Centers." Is this just for the February and March 2019 clinics, or are all the clinics to take place during the year supposed to happen at one of these locations?

No, not all the clinics will take place at Parks Centers, and you are welcome to propose hosting a clinic at any location you like for any month of the year. Past events have been held at agency offices, places of worship, community halls, etc. If the space you propose is very small or inaccessible, we may suggest another venue, but this will take place later in the process and should not affect your LOI evaluation.

We are working with Seattle Parks and Recreation to book a few clinics at Community Centers to provide additional venue options to NCC partner agencies. We assume that partners might have trouble booking spaces and preparing for a clinic in February and March because it will be a very short timeline after contract negotiation. So, it is likely that the February and March clinics will take place at one of those Parks Community Centers listed, but you are still welcome to propose another location during those months. You are also welcome to proposed hosting at another Parks Center and OIRA can potentially help set up that arrangement.

7. If there are other options for clinic locations [besides Parks Centers] past March 2019, do they have to be located within Seattle city limits? If so, how are the city limits defined? Is White Center included?

Yes, clinics do have to be located within city limits. We are not able to change this, and White Center has been off limits in prior requests. The Seattle City Council District Map is probably the easiest to use to look at where the borderlines are drawn:

<http://www.seattle.gov/cityclerk/agendas-and-legislative-resources/find-your-council-district>

8. We serve clients outside Seattle, sometimes they come from Seattle, but we are not located in Seattle. Can we apply?

As an NCC contracted agency you are not required to have offices in Seattle. You must host your clinics in Seattle. All the clinics must take place inside the Seattle City limits. It is fine for participants to come from elsewhere, but we cannot make exceptions on the location of the events being in the city. In the past, many agencies have worked with places of worship and other community spaces to host clinics for free. OIRA can help set up hosting clinics at Seattle Parks and Recreation Community Centers also.

9. Do the citizenship clinics have to serve residents of Seattle only, or can residents of South King County and surrounding areas also participate?

Volunteers and legal permanent residents who live outside Seattle may participate in the clinics. The current restriction is that all clinics take place within the city limits. This means all the clinic venues must be within the city of Seattle.

10. We have partnered with other organizations in the past to host naturalization workshops and currently have a staff member with an immigration law background who is interested in providing more naturalization support. With that background are we the type of organization you are looking for to co-lead workshops for this LOI?

Citizenship clinics are fairly complex as are the legal aspects of naturalization. That said, one of the aims of the NCC clinic program is to build capacity for this work among our partner agencies. Some of our current partners started out doing outreach for the program and now have co-led clinics. In the past, many of our co-led clinics have had one agency that focuses on outreach and participant engagement, while the other co-lead focuses on the legal aspects of the event. We have also had agencies serve in an “apprentice” role initially to learn more about citizenship clinics, before diving into clinic leadership.

If naturalization has never been a part of your agency’s programming, it would also be important to have a clear idea how it fits into your priorities moving forward. Some things that could make you a strong co-lead without as much background in immigration law: experience with outreach and community education; a strong connection to a given community and knowledge of a need for citizenship services within that community; a volunteer base, or experience running volunteer events; experience running client or community focused events; language capacity such as staff who speak multiple languages; etc.

11. Have you previously partnered with an agency that provides referrals of participants specifically from the Somali community?

Past NCC clinics have focused outreach to the East African community generally, offering services in Somali, Tigrinya, Amharic and Oromo. Multiple partners have supported with this outreach and clinic assistance. We have not had a partner agency specifically focused on Somali outreach for the NCC clinics.

12. How might an agency support NCC activities through training, technical assistance, or referrals?

For the first NCC LOI in 2017 we only gave agencies the option of leading or co-leading clinics. Since 2017 we have expanded clinic support roles. Currently they include legal experts reimbursed for attending clinics, but we are open to other forms of support as well. NCC agencies have an ongoing need for technical assistance and training, and proposals to provide these would be considered. An agency proposing to accept referrals of participants who are unable to complete their citizenship applications at the clinics would be considered, but the proposed process for handling referrals and agency capacity to accept complex cases would need to be strong.

Application Process Questions

- 13. Are the people in the reviewing committee knowledgeable about citizenship and some idea of who the agencies applying are? We were just wondering how detailed we should be in the proposal.**

The review panel have experience with citizenship either in terms of program management, contract administration or as past workshop/clinic volunteers. No one on the panel is an immigration legal expert. They should all be familiar with the basics of requirements and application processes.

- 14. Is there a maximum proposal in terms of the amount of money requested for the proposed work?**

No, but bear in mind that there are currently 11 NCC contracted agencies and there could be more or less next year. So, proposing a plan to use up the entire available funding amount would not be realistic. That said, there is no limit to the amount each agency can propose to contract for through this LOI.

- 15. [The Guidelines say] it will focus on “low- and middle- income residents who are not eligible for other free naturalization services,” so does that mean we can’t double up with our DSHS grant?**

No, clinic participants should not be counted as Washington State Department of Social and Health Services Office of Refugee and Immigrant Assistance (DSHS ORIA), also sometimes considered *New Citizen Program (NCP)* clients. The goal of NCC is to expand the number of people accessing citizenship legal services. The DSHS case management model focuses on very low-income and vulnerable populations, whereas NCC clinic participants must have straightforward cases in order to be served in the clinic setting. We also do not have an income screening for NCC services and they are currently open to LPRs of any income level. There are some exceptions to this rule which will be discussed during contract negotiations.

- 16. “What percent of your organization’s budget supports your legal naturalization program?” Does this mean what percentage of our organization’s budget is made up of citizenship contracts/funding? We aren’t supported by any of our organization’s overall budget. We support our program through contracts & grants.**

The percentage would be the sum of all grants, contracts and general fund dollars used for the Citizenship program, divided by the sum of all grants, contracts and general fund dollars in the agency’s overall budget. You can do this for the current budget year or a previous budget year if the current year is not representative of your normal funding structure. Just note what year’s information you are using, and feel free to include a note to explain.

- 17. How does reimbursement for contract deliverables work? What is the pay rate?**

In the past the reimbursement structure was to provide a certain amount of funding for leading or co-leading a clinic. This overall structure is likely to remain similar in 2019 but the reimbursement amounts are subject to change. In 2018, co-leading a clinic was reimbursed at \$5800 per clinic; initiating a clinic as sole lead was reimbursed at \$9600 per clinic; other reimbursement rates for clinic support were specific to each contract; and each NCC partner agency received a monthly base payment. These rates are only offered for context.

18. It says the word “proposal” in Guidelines. Are we expecting an LOI or a formal grant proposal?

The term “proposal” is meant only to refer to the Letter of Intent and nothing more. The NCC 2019 LOI Application Cover and Narrative Questions gives more details about submission requirements, including the length of your narrative responses.

19. What does the application question of “YOUR ROLE” mean?

You can choose either to lead/co-lead a clinic OR to support the clinic program in another way OR to do both. Check the boxes to one, two or all three of the questions depending on what work you propose to contribute.

20. What are the distinctions between the Clinic Support Role versus Clinic Lead?

The two separate roles are meant to give flexibility to agencies that want to contribute to the NCC program but may not fit well into a 50/50 split of responsibilities for clinic leadership. There is no right or wrong answer for an agency to propose but the proposal should match well with the agency’s capacity.

21. How do we list the hours per week of Naturalization staff if they fill multiple roles or work for other projects?

It is fine to include any staff hours devoted to naturalization and hours devoted to immigration legal work more generally (i.e. green card renewals, etc.), especially if you do not divide naturalization work from other immigration work. Please leave out staff time spent on other project areas not related to immigration legal assistance. You can make a note to explain that an individual is full-time or covers multiple project areas to give us a fuller picture. You may adjust the table as needed to include these notes.

22. We are hiring a new [staff member] and the interview and offer would be right at the time the LOI is due. Is it OK to list this person as a staff member in the table?

It is fine to note you are in the process of hiring someone and name the role. If the hire is confirmed, you can list the person’s name.

23. How to list pro bono attorneys in the table?

It is fine to use a separate line to give a description of the number and dedicated hours of pro bono attorneys. It is fine to adjust staffing table as needed to accommodate this note.

24. Is there any minimum font size requirement for this LOI?

We neglected to include a font minimum in the instructions, so no one will be penalized for a particular font size. That said, a font that is too small for the review panel to read comfortably may make it more difficult for them to review your letter. In the past we have used 11-point font as the minimum for LOIs and RFPs.

25. What parts of the application count as the cover sheet vs. the narrative questions? Is the narrative just the four questions under the heading “Questions for All Applicants”? Or does it include responses to all the subsequent questions/sections as well, except for the budget?

The Narrative section would include answers to “Questions for All Applicants” plus answers to “Clinic Lead or Co-Lead Questions” and/or answers to “Clinic Support Questions” depending on which role you chose in the “Your Role” section. Whether you complete all three sets of questions or only two will depend on whether you are proposing to (co-)lead a clinic, fill a clinic

support role or both. All the written responses would be considered part of the 4- to 6-page narrative. The budget sheet is not considered part of the narrative.

26. Does the 6-page limit for the narrative section include the Clinic Lead/Co-Lead and Clinic Support tables?

The Clinic Lead/Co-Lead table and Clinic Support should fit within the 4- to 6-page limit for the narrative. However, because this is not clear in the instructions, there will be no penalty if these tables go outside the 6-page limit. The budget sheet is not considered part of the narrative.

27. Will applicant questions receive individual responses, or will there be a Q&A published on the OIRA website? If so, what is your target date for publishing the Q&A?

We will receive and respond to questions by Friday, December 7th. I will email a Q&A document to all those who have called or sent questions via email by this Friday evening. The Q&A document is scheduled to be uploaded on Friday the 7th as well, but it may not be published to the website until Monday, December 10.